

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/583628

FILING DATE
7 FEB 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
	1	/						51					
2	/							52					
3	/							53					
4	/							54					
5	/							55					
6	/							56					
7	/							57					
8	/							58					
9	/							59					
10		/						60					
11		/						61					
12		/						62					
13		/						63					
14		/						64					
15		/						65					
16		/						66					
17		/						67					
18		/						68					
19		/						69					
20		/						70					
21		/						71					
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42								92					
43								93					
44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
TOTAL IND.	/							TOTAL IND.					
TOTAL DEP.	/							TOTAL DEP.					
TOTAL CLAIMS	/							TOTAL CLAIMS					